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CONTRACEPTIVE PERCEPTIONS AMONG ARAB AND NON-ARAB MUSLIM MALES

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Abstract: *Enormous studies have been conducted on the dynamics of family planning adoption and the quantitative research has focused mainly on the determinants of contraceptive choices where the women have been taken as collateral respondents. The men's attitudes towards family planning may affect not only their wives intention to use contraception but also the choice of a particular family planning method particularly in the context of staunch Islamic ideology. Therefore, in this article, a qualitative liberal attempt is made to severance the key proponent arguments related to behaviours towards contraception among the Muslim males. Face to face qualitative interview findings reveal the social acceptability of contraceptives in a variety of situations as well as critically explicate the flexible availability of contraceptives which not only increase the degree of confidence in society for rational consequences. Finally, the analytical understanding of the study leads to the development of an emerging theory somewhat called 'social transition approach'.*

Keywords: *Contraception, Muslim males, social transition.*

1. Introduction

The use of contraception is not a new concept but the opinionated dynamics of family planning in connection with male's own point of view is not enormous in the literature. The reliance of women only approaches¹ towards contraception inevitably invokes the social scientists in two

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¹ Under quantitative framework, women are the typical respondents in most of the knowledge, attitude and practice surveys

ways. In the first way, peripheral attention has been given to studying the social determinants of contraceptive use among men. The men's attitudes towards family planning may affect not only their wives intention to use contraception but also the choice of a particular family planning method particularly in the context of staunch Islamic ideology. According to United Nations the male's involvement in population planning is defined as the ways in which men relate to reproductive health, problem, reproductive rights and reproductive behavior [1]. Both men and women involvement on fertility and reproductive health was the key message in 1994 International Conference on Population and Development and 1995 Fourth World Conference on Women. There are further two aspects of male's involvement in family planning, first is that the men accept and support their partner's need, choices and rights in fertility regulations and second men's have their own perceptions regarding contraceptive knowledge, approval, use and sexual behavior. However, the husband's reasons for opposing or accepting family planning vary by their socio-economic characteristics, religious and societal norms. It is notable that globally, many studies in different formulations under quantitative frame work have been conducted to determine the men's role and participations in family planning [2-12].

In the second way, the acute qualitative appraisals of contraceptive dynamics among Muslim males are underdeveloped areas of social research. The study of contraceptive behavior should not be indulged only by the confined options of the structured instrument², which is mostly developed by the researcher(s), which presents the fragment picture of the underlying social mechanism. Few qualitative studies about the issue under investigation have been conducted in the Uganda and Jordanian context [13-15].

Hence, keeping in mind the above documented views as background rationale, describing the males own views towards approval and disapproval of family planning under social or religious beliefs is not only a novice connotation in the field of qualitative inquiry but also provide a gentle direction for policy as well as a guideline for constructing a new social theory. This research propounds the following research questions:

- A general elucidate remark about the awareness of the underlying issue.
- To explore and adjudicate the social or religious paradigms leadings towards the acceptance or rejection of contraceptives in Muslim societal setting.
- To develop a theoretical exposition through heritage transition about the issue under study.

2. Methodology

A qualitative research design is used to best grasp the issue in natural settings. There exists a variety of techniques, each one with some good reasons, for collecting empirical material under the qualitative study design. Qualitative interviews, focus groups discussions, participant observations and documentary analysis are among the most common and familiar instruments. When interested to identify thoughts, impressions on general social issue(s), a free to express group discussion is generally recommended [16]. But when the underlying issue is sensitive and particularly has concerns over the confidentiality of the participants, then the use of focus group is not permissible [17-18]. The unavailability of opinionated material on the issue like family planning in a formal documented way in Islamic settings reinforces towards the dismissal of

² The most common instrument is the structured questionnaire with predefined set of options.

documentary approach as an instrument. Finally, the situation is possibly best grasp in natural settings by employing the instrument of qualitative interviewing. Interviewing technique itself has multi-facets: structured, group-based, unstructured, semi-structured and expert interviews [19]. However, semi-structured one to one, face to face interviews were conducted.

2.1 *Sampling empirical materials*

A non-random theoretical sampling was used in study to select the recipients. Theoretical sampling is one particular form of purposive sampling. The justification for using convenience sampling is elaborated with the following explanation: suppose a blood sample from a person is required to detect the particular disease say A. Should the sampling frame of the whole body of person by consisting of unique identification number of body parts must be laid down first and then randomly a part of the body should be selected, and from the selected part then blood sample should be taken? What will happen if heart of the person is exactly under the selected part of the body by using a novel statistical procedure? Many questions like this one make the way of adopting the convenience or non-probability sampling for a variety of good reasons. Thus, in short, there are many core social phenomenon which exactly resemble to the human body and where the non-random sampling looks to be quite appealing, appropriate and justified apart from the conventional merits³ of non-random sampling over the random sampling.

2.2 *Sampling empirical materials*

Mainly this study was conducted in the Highfield campus, University of Southampton, United Kingdom. Three main venues for fieldwork were identified namely: Hartley Library, Public Workstations and Muslim prayer halls. Initially, six pilot one-to-one face to face informal interviews each of forty to fifty minutes durations were conducted. From these pilot interviews, six major themes were conceived which later on consolidated into a semi-structured questionnaire. Study participants of age (20-35) years were contacted personally on the study locations. After getting a confirmed informal consent from study materials, a formal consent form with project description sheet was given to the participants and the possible available time for a formal interview was gathered. A total of 24 one to one interviews were conducted. The interviewees were selected on the basis of following characteristics: Arabs⁴ or Non-Arabs Muslim males, married or unmarried singles and having at least a postgraduate level of UK education. All the interviews were digitally recorded and completely transcribed using express scribe software. Finally, to check the validity of the emerging theme and results of analysis, three more informal interviews were also conducted.

3. Findings

3.1 *General and method specific knowledge of contraceptives*

Interviewees were asked to what they know about contraception as well as to name all methods they knew or heard. The interview base finding revealed almost a common opinion with respect to this general knowledge of contraception irrespective of marital classification, but the method

³ Like non-random sampling is inexpensive, easy over the random sampling.

⁴Males belong to those countries where official language is Arabic.

specific opinion was seen to be divergent between the Arabs and Non-Arab participants. Among Arabian participants, Non-African Arabs looked to be more salient on method specific knowledge than African Arabs. African Arabs cited only the awareness of oral pills and condoms whereas the Non-African Arabs mentioned women based contraceptives in addition to oral pills and condoms. On the whole non-Arab Muslim males were seen to have more knowledge of contraception.

3.2 *Social and Religious acceptability of Contraceptives*

Participants expressed plentiful views like from thin streams to great waves on the social and religious acceptability of contraceptives. Family health, birth spacing not stopping, controlling for sexually transmitted diseases (STDs), providing better quality of life to less number of children and need based used of contraception were declared to be the key social situations of contraceptive acceptability in Islamic settings, 'I and my wife, we both are working on a project so we cannot afford baby for the next three years, so Islam give us the way like it is said in Hadith: deal your matters when there is no harm, family planning is not a pillar of Islam, but it is a small branch which should be interpreted in a correct way, our religion is not giving us the direction only but gives logic behind direction also' (AMAP12).

Birth spacing but not stopping was a common view among Arab participants whereas the birth spacing as well as the birth stopping after the pre-decided family size was affluent among Non-Arab participants. There was also an acute situation among all participants to strongly oppose the use of contraception outside union.

3.3 *Abortion*

Abortion is a controversial method of family planning in all regions or social settings. Globally, the Mexico City policy or Gag rule is a landmark issue on abortion controversy [20-21]. However, most of the participants of this study accepts abortions under logical explanations, 'I want to say some pills use for abortion, if the baby is more than six months old, do not kill the baby, I don't know why mother don't want the baby, but it is not legal, I will not accept pills or any other thing to kill the baby, but if baby is less than six months then its ok' (NAUMP2).

4. Analytical emerging theme

Strong social beliefs under the context of modernism are creating the observable flexibility in the supposed confined religion. It is asserted that the flexible ideology in the religion was or is present, yet unexplored or previously not conveyed properly. This study under the sociological context reconfirms the flexibility by narrowing the gap between staunch beliefs (anti-family planning Islamic views) and sensitive issues (acceptance of contraception) in modern era. To put it on other side, the same study can be re-implemented on the former generations of the respondents or the forthcoming one, it may possible that a narrow social acceptability with affirmed religious doctrine might observed in one particular generation, but a more wider acceptability might be seen in the next generation, and thus going on. Therefore, it is quite possible that the emergence of this modern and social environment may best be observed over the course of few generations. This assertion of social acceptance which narrows the gap

between affirmed doctrine and modern innovations can be referred as a ‘Social Transition approach or theory’ (STT) which is shown in figure 1.

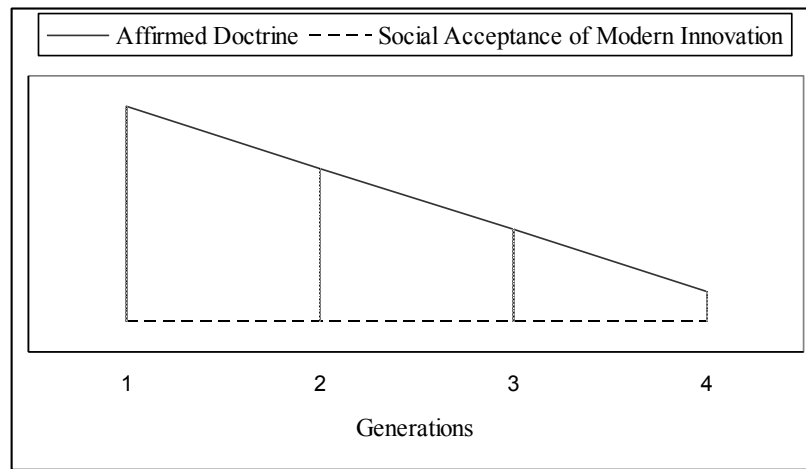


Figure 1. Social Transition Approach.

5. Conclusion

This study was started with the aim to determine staunch sensitive believes regarding a sensitive social issue in Islamic context called family planning in modern social era. The study provides a generic remark about the universal knowledge of contraception among Muslim males. The study further provides the variety of social situations family health for example for the core acceptance of contraception. Indeed, the situational social change in the affirmed doctrines is not only substantially visible but it is also undergoing the way over the course of generations, even not yet complete. Presently, It can be concluded that Islamic society has started not to form a natural part of traditional Islamist and historical culture where this famous quote was used to mirrored in literature “Islam promotes to have kids with safe health”, in which the first half of the quote is mostly projected. Alternatively, first half of the quote is supported with the high fertility levels found in most of the Muslim societies. The key counter argument goes towards the dependency of women’s decisions on their husbands particularly on deciding family sizes. This study not only explores but also naturally demonstrates that the second half of the quote exists but usually it is ignored. Moreover, the core acceptability of contraceptives in the context of safe health, better financial quality of life with other social formulations purely with in marriage framework put forward an emerging theme say social transition. The theory might be based on different phases over the course of generations which needs an empirical support and thus remain an area of research for further investigation. Finally, the findings also posit critical explanations towards the contraceptive disapproval. In one explanation, the cheap, wide and easily available contraceptives increase the degree of confidence in the society or among the young generation of the society. However, outcomes of this confidence ultimately make a way towards many rational consequences.

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